

PLACE OF BIRTH  
County of Pima  
District of Arizona  
Town of Miami  
or  
City of \_\_\_\_\_ (No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_)

ARIZONA STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS  
State Index No. 178  
ORIGINAL CERTIFICATE OF BIRTH. Co. Registrar's No. 564  
Local Registrar's No. \_\_\_\_\_

FULL NAME OF CHILD Michaela Delgado Born YES  
If child is not named, make Supplemental Report on blank obtainable from local registrar. Alive NO

Sex of child Female Twin or other Triplet and { Number in order of birth 10 Legiti- mate? yes Date of Birth Sept. 29 1918 Month Day Yr.

FATHER  
Full Name Jimata Delgado  
Residence Miami  
Color or Race Mexican Age at last Birthday 42 Years

Birthplace Pandolagans Mex.  
Occupation Miner

MOTHER  
Full Maiden Name Maria M. Cumpo  
Residence Miami Ariz.  
Color or Race Mexican Age at last Birthday 40 Years

Birthplace Pandolagans Mex.  
Occupation Housewife

Number of child of this Mother 10 Number of Children, of this mother, now living 9 Were precautions taken against Ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of the above child; and that it occurred on Sept 29 1918, at 5:50 A.M.

\*When there is no attending physi-  
cian or midwife, then the householder  
should make this return.

Signature Cyril M. Crow M.D.  
Attending physician, midwife, householder.\*

Given or Christian name added from a

Address Miami, Arizona

Supplemental report \_\_\_\_\_ 1918 Filed Dec 8 1918

446-929-436  
COUNTY REGISTRAR.

A True Copy  
Filed Jan 8 1919

LOCAL REGISTRAR  
B. S. Gay  
COUNTY REGISTRAR